Case 4:24-cv-12811-SDK-DRG ECF No. 26-2, PageID.281 Filed 04/16/25 Page 1 of 6 Loan number: \_\_\_\_\_

# **Mortgage Assistance Application**

If you are having mortgage payment challenges, please complete and submit this application, along with the required documentation, to Wells Fargo via mail: Wells Fargo Home Mortgage, MAC X9999-01N, PO Box 1629, Minneapolis, MN 55440-9790, fax: 1-866-359-7363, or online: wellsfargo.com/mortgageassistance. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

We will use the information you provide to help us identify the assistance you may be eligible to receive. If you need help completing this application, please contact Wells Fargo at 1-800-416-1472.

For a list of HUD-approved housing counseling agencies that can provide foreclosure prevention information, contact one of the following federal government agencies:

- The U.S. Department of Housing and Urban Development (HUD) at (800) 569-4287 or www.hud.gov/counseling
- The Consumer Financial Protection Bureau (CFPB) at (855) 411-2372 or www.consumerfinance.gov/mortgagehelp

If you need assistance with translation or other language assistance, HUD-approved housing counseling agencies may be able to assist you. These services are provided without charge.

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Borrower Information	
Borrower's name: KARL W Staffeld	
Social Security Number (last 4 digits):	
E-mail address: KarlStaffelo Gamail . Com	n en er kaladariek en de arrendag er et de gapatas verdenden et de de Noordende en
Primary phone number: (134) 417-6432	Cell   Home   Work   Other
Alternate phone number (734) 904-1010	Cell   Home   Work   Other
Co-borrower's name:	
Social Security Number (last 4 digits):	
E-mail address:	
Primary phone number:	☐ Cell ☐ Home ☐ Work ☐ Other
Alternate phone number:  Preferred contact method (choose all that apply): Cell phone Home phothis box indicates your consent for text messaging	☐ Cell ☐ Home ☐ Work ☐ Other  one ☐ Work phone ☐ Email ☐ Text - checking
Is either borrower on active duty with the military (including the National Gu on active duty, or the surviving spouse of a member of the military who was	마음 마음이 얼굴먹으라면 모르겠다면 하다는 하는데 하는데 이 사람이 이 사람이 되었다. 그는 사람이 없는데 아무리를 하는데 아무리를 하는데 하다면 하다면 하다면 하다면 하다.
Property Information	0 1/2 -
Property Address: 341 COVVIE Rd Ann	Arbor, MI 78105
Mailing address (if different from property address):	
• The property is currently: A primary residence   A second home	☐ An investment property
• The property is (select all that apply): Owner occupied  Renter occu	pied 🔲 Vacant
• I want to: Keep the property Sell the property Transfer ownersh	
Is the property listed for sale?  Yes No - If yes, provide the listing agent sale by owner" if applicable:	's name and phone number—or indicate "for
Is the property subject to condominium or homeowners' association (HOA) for	ees? Yes No – If yes, indicate monthly dues:

ne hardship causing mortgage payment challenges began or  Short-term (up to 6 months)	
Long-term or permanent (greater than 6 months)	opefully will Resolve with
TYPE OF HARDSHIP (CHECK ALL THAT APPLY)	REQUIRED HARDSHIP DOCUMENTATION
Unemployment	■ Not required
Reduction in income: a hardship that has caused a decrease in your income due to circumstances outside your control (e.g., elimination of overtime, reduction in regular working hours, a reduction in base pay)	■ Not required
Increase in housing-related expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control (e.g., uninsured losses, increased property taxes, HOA special assessment)	Not required
Disaster (natural or man-made) impacting the property or borrower's place of employment	■ Not required
Long-term or permanent disability, or serious illness of a borrower/co-borrower or dependent family member	<ul> <li>Written statement from the borrower, or other documentation verifying disability or illness</li> <li>Note: Detailed medical information is not required, and information from a medical provider is not required</li> </ul>
☐ Divorce or legal separation	<ul> <li>Final divorce decree or final separation agreement OR</li> <li>Recorded quitclaim deed</li> </ul>
<ul> <li>Separation of borrowers unrelated by marriage, civil union, or similar domestic partnership under applicable law</li> </ul>	<ul> <li>Recorded quitclaim deed OR</li> <li>Legally binding agreement evidencing that the non-occupying borrower or co-borrower has relinquished all rights to the property</li> </ul>
Death of borrower or death of either the primary or secondary wage earner	<ul> <li>Death certificate OR</li> <li>Obituary or newspaper article reporting the death</li> </ul>
□ Distant employment transfer/relocation	<ul> <li>For active duty service members: Permanent Change of Station (PCS) orders or letter showing transfer.</li> <li>For employment transfers/new employment: Copy of signed offer letter or notice from employer showing transfer to a new location or written explanation if employer documentation not applicable, AND</li> <li>Documentation that reflects the amount of any relocation assistance provided (not required for those with PCS orders)</li> </ul>
Other – hardship that is not covered above:	<ul> <li>Written explanation describing the details of the hardship and any relevant documentation</li> </ul>

## **Borrower Income**

Please enter all borrower income amounts in middle column.

MONTHLY TOTAL BORROWER INCOM	E TYPE & AMOUNT	REQUIRED INCOME DOCUMENTATION
Gross (pre-tax) wages, salaries and overtime pay, commissions, tips, and bonuses	\$	<ul> <li>Most recent pay stub and documentation of year-to-date earnings if not on pay stub OR</li> <li>Two most recent bank statements showing income deposit amounts</li> </ul>
Self-employment income	\$	<ul> <li>Two most recent bank statements showing self-employed income deposit amounts OR</li> <li>Most recent signed and dated quarterly or year-to-dat profit/loss statement OR</li> <li>Most recent complete and signed business tax return OR</li> <li>Most recent complete and signed individual federal income tax return</li> </ul>
Unemployment benefit income	\$ 0	No documentation required
Taxable Social Security, pension, disability, death benefits, adoption assistance, housing allowance, and other public assistance	\$ 860.86	<ul> <li>Two most recent bank statements showing deposit amounts OR</li> <li>Award letters or other documentation showing the amount and frequency of the benefits</li> </ul>
Non-taxable Social Security or disability income	\$ 2,411.00	<ul> <li>Two most recent bank statements showing deposit amounts OR</li> <li>Award letters or other documentation showing the amount and frequency of the benefits</li> </ul>
Rental income (rents received, less expenses other than mortgage expense)	\$ 0	<ul> <li>Two most recent bank statements demonstrating receipt of rent OR</li> <li>Two most recent deposited rent checks</li> </ul>
Investment or insurance income	\$	<ul> <li>Two most recent investment statements OR</li> <li>Two most recent bank statements supporting receipt of the income</li> </ul>
Other types of income not listed above (Note: Only include alimony, child support, or separate maintenance income if you choose to have it considered for repaying this loan)	4500 -/1 ontribution hwife.	<ul> <li>Iwo most recent bank statements showing receipt of income OR</li> <li>Other documentation showing the amount and frequency of the income</li> </ul>

## **Current Borrower Assets**

Exclude retirement funds such as a 401(k) or Individual Retirement Account (IRA), and college savings accounts such as a 529 plan.

Checking account(s) and cash on hand	\$ 2500.
Savings, money market funds, and Certificates of Deposit (CDs)	\$ 1000.
Stocks and bonds (non-retirement accounts)	\$ 0
Other:	\$ 0

### **Borrower Certification and Agreement**

- I certify and acknowledge that all of the information in this Mortgage Assistance Application is truthful, and the hardship I
  identified contributed to my need for mortgage relief. Knowingly submitting false information may violate Federal and
  other applicable law.
- 2. I agree to provide my servicer with all required documents, including any additional supporting documentation as requested, and will respond in a timely manner to all servicer or authorized third party\* communications.
- 3. I acknowledge and agree that my servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
- 4. I consent to the servicer or authorized third party\* obtaining a current credit report for the borrower and co-borrower.
- 5. I consent to the disclosure by my servicer, authorized third party,\* or any investor/guarantor of my mortgage loan(s), of any personal information collected during the mortgage assistance process and of any information about any relief I receive, to any third party that deals with my first lien or subordinate lien (if applicable) mortgage loan(s), including Fannie Mae, Freddie Mac, or any investor, insurer, guarantor, or servicer of my mortgage loan(s) or any companies that provide support services to them, for purposes permitted by applicable law, including but not limited to providing mortgage assistance, verifying any data or information contained in this application, and performing audit and quality control reviews. Personal information may include, but is not limited to: (a) my name, address, telephone number, (b) my Social Security number, (c) my credit score, (d) my income, and (e) my payment history and information about my account balances and activity, and (f) my tax return and the information contained therein.
- 6. I agree that the terms of this borrower certification and agreement will apply to any modification trial period plan, repayment plan, or forbearance plan that I may be offered based on this application. If I receive an offer for a modification trial period plan or repayment plan, I agree that my first timely payment under the plan will serve as acceptance of the plan.
- 7. I consent to being contacted concerning this application for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the lender, servicer, or authorized third party.\*
  - \* An authorized third party may include, but is not limited to, a housing counseling agency, Housing Finance Agency (HFA) or other similar entity that is assisting me in obtaining a foreclosure prevention alternative.

Borrower signature:	Karl la	) Stational	// Date:	3/9/23
		, supero		
Co-Borrower signature:			Date:	

Please submit your completed application, together with the required documentation, to Wells Fargo via mail: Wells Fargo Home Mortgage, MAC X9999-01N, PO Box 1629, Minneapolis, MN 55440-9790, fax: 1-866-359-7363, or online: wellsfargo.com/mortgageassistance. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

We will use the information you provided to help us identify the assistance you may be eligible to receive.

#### To Whom it May Concern,

\*\*MIHAF PROGRAM NOTIFICATION\*\*

Client / Applicant: KARL STAFFELD Status: Hold / Requesting Info Submitted Date: 7/28/22 11:44 AM

We need more information on the following:

Items Needed:

-Co-Applicant Photo Identification(too blurry to read current)

Please use the link in the email below to submit these documents to your file. DO NOT respond to this email with the paperwork as it will not reach us.

In addition to the paperwork, I will also need to you answer the following questions:

- I saw on your application you have 5 house hold members. What are ages of the three others? If over the age of 18, is he employed or a full time student?
- Can you walk me through dates and specific details of how you either had a loss of income OR increase in living expenses due to covid between January 2020 to present day?
- Are your taxes included in your mortgage escrow?
- With your Mortgage being over the amount the program will pay for, you may need to meet a housing counselor for the remainder. I will attach a link below.

Thanks!

**MIHAF** 

This document is to answer the Case Worker's questions sent to us by email on Friday, March 31, 2023.

- 1. We have scanned the Co-Applicants photo identification and uploaded it.
- 2. The composure of the household is as follows:

Karl Staffeld – DOB 01/04/1959, Disabled individual, unable to work.

Azar Sadeghi-Staffeld – DOB 06/15/1963, Disabled individual, unable to work.

Bobak Sadeghi – DOB 04/18/1969, New immigrant, unemployed.

Roya Sadeghi – DOB 08/28/1973, New immigrant, unemployed.

Kourosh Sadeghi – DOB 12/05/2000, Student.

Kiarash Sadeghi – DOB 10/18/2007, Student.

Isiah Jones – DOB 02/23/2009, Student, 50% of the time he stays with us.

Zion Jones – DOB 12/22/2016, Student, 50% of the time she stays with us.

- 3. We were self-employed and we totally lost all of our workers because starting March 2019 the employees were afraid to show up to work. We were also afraid to show up to work and consequently, we lost our business and self-employment income.
- 4. Our taxes are not included in our mortgage and there is no escrow.
- 5. We are more than willing to meet with the Housing Counselor and we hope that somehow we can come up with the difference of \$62,338.68.

If you have any questions about the information provided, please call

Azar Sadeghi-Staffeld at (734) 417-0432